

~~10 DEPARTMENT OF HUMAN SERVICES~~

~~148 BUREAU OF SOCIAL SERVICES~~

~~Chapter 101 AIDS Case Management Program Standards~~

~~1. Purpose:~~

~~— This rule sets forth AIDS/HIV Case Management Program Standards that must be adopted by agencies under contract with and/or designated by the Bureau of Child and Family Services as Medicaid providers of case management services to persons with HIV diseases. Knowledge and use of these standards by administrators and case managers will result in consistent organization and delivery of case management services.~~

~~2. Definition:~~

~~— AIDS/HIV Case Management Services are those which identify the social, medical, psychological, legal, economic and other needs of the person with HIV disease. Case management identifies the services necessary to meet those needs, and provide the referral and coordination to ensure access to those services. Case management services shall be provided by a licensed social workers registered nurse or other staff as determined by the Bureau of Social Services.~~

~~(Maine Medical Assistance Manual, Section 13.06)~~

~~3. Policies and Procedures:~~

~~A. Mission Statement: The agency shall adhere to the standards set forth in the following mission statement.~~

~~— Case management to persons with AIDS/HIV disease shall be provided in a manner that ensures the well-being of the Individual and the persons in his or her support system. The primary purpose of case management will be to expedite the client's access to appropriate medical and social services. This will be accomplished through assessment, planning, advocacy, coordination and monitoring of services. These functions are to be carried out in consultation with the client.~~

~~B. Organization~~

~~1. The agency shall develop and implement an organizational structure with clear lines of authority and responsibility. This structure shall be described in a written policy which will be updated as necessary or on an annual basis.~~

2. ~~The agency shall have a written plan which documents long and short-term goals for the agency's AIDS-related services. This plan shall be revised as necessary but at least on an annual basis.~~

~~C. Advisory Committee~~

~~The agency shall have an advisory committee, at least one member of which shall be a person with HIV disease. The functions of the committee will be the following:~~

1. ~~To provide the agency with recommendations on AIDS/HIV case management issues.~~
2. ~~To address the needs and priorities of the communities served.~~
3. ~~To identify service gaps at the local level and assist the agency with plans to address those gaps.~~

~~D. Client Management~~

1. ~~The agency shall develop and implement written policies and procedures for routine intake of clients. The agency shall conduct a psychosocial assessment for each client. The agency shall also obtain for each client a medical assessment from the primary physician providing medical care.~~

~~a. Intake criteria shall include, but need not be limited to the following:~~

1. ~~client history~~
2. ~~client psychosocial assessment; and~~
3. ~~client medical assessment~~

~~b. Intake procedures shall address, but need not be limited to the following:~~

1. ~~prioritization of clients~~
2. ~~establishment of a waiting list, and procedures for ensuring delivery of services; and~~

3. ~~referral to other case management service providers, by need or if a delay occurs before the initiation of services.~~
2. ~~The agency shall develop and implement written policies and procedures for handling emergency intakes.~~
3. ~~A client may receive AIDS/HIV case management services from the agency under contract to the Bureau of Child and Family Services in the client's geographic area. A client may also receive services from an agency designated as a Medicaid provider of AIDS/HIV case management services in the client's geographic area.~~
- ~~A client who moves between the AIDS case management catchment areas will be transferred according to the following protocol. A summary shall be prepared which addresses the following, and is to be forwarded to new provider with the consent of the client:~~
 1. ~~client's status at transfer;~~
 2. ~~client's continued needs;~~
 3. ~~referral for additional services; and~~
 4. ~~status of persons in the client's family or friendship networks as appropriate.~~
4. ~~The agency shall develop and implement written policies and procedures for client discharge.~~
 - a. ~~Discharge criteria shall includes but need not be limited to:~~
 1. ~~client's conditions and~~
 2. ~~availability of additional community services.~~
 - b. ~~In the event of discharge, a summary shall be prepared and maintained in the client's record which addresses the following:~~
 1. ~~client's status at discharge;~~
 2. ~~client's continued needs;~~
 3. ~~referral for additional services; and~~

~~4. status of persons in the client's family or friendship network, as appropriate.~~

~~5. The agency shall develop and implement written policies and procedures for defining and discharging inactive clients.~~

~~6. The agency shall develop and implement written policies and procedures for handling clients who fail to attend case management appointments.~~

~~7. The agency shall develop and implement written policies and procedures for reporting the following to the appropriate state agencies:~~

~~a. Clients who are known to be infecting other persons by practicing unprotected sex, sharing needles, or by other activities known to spread HIV virus.~~

~~b. Suspected incidents of client abuse and neglect.~~

~~c. Suspected incidents of child abuse and neglect.~~

~~d. Clients who pose a danger to themselves or others.~~

~~4. Availability and Access to Case Management Services~~

~~1. The agency shall maintain regularly scheduled hours of operation, and include provision for clients to receive services outside of normal business hours.~~

~~2. The agency shall provide access to services for client emergencies that develop outside of normal business hours.~~

~~3. The agency shall make reasonable provision to assure that services are available in the client's native language.~~

~~4. The agency shall make provisions to assure that services are available to physically handicapped and visually and hearing impaired clients.~~

~~5. Clinical Records~~

- ~~1. Clinical records shall be maintained according to applicable state, federal and professional regulations.~~
- ~~2. The agency shall maintain only one clinical record for each client.~~
- ~~3. The agency shall maintain records in a manner which assures confidentiality and security.~~
- ~~4. Access to records shall be limited to:~~
 - ~~a. clinical staff having involvement with the case;~~
 - ~~b. the client;~~
 - ~~c. the Bureau of Health; and~~
 - ~~d. other persons as allowed by state or federal law. (i.e. Maine Medical Assistance Manual Section 13.06)~~
- ~~5. The agency shall conduct and document assessment of all clients receiving service. This shall occur at the initiation of services and at each contact with the client, or in the client's behalf.~~
- ~~6. Entries shall be made at least weekly in the records of clients who are Medicaid eligible as described in the Maine Medical Assistance Manual, Section 13.08-1~~
- ~~7. Organization of clinical records shall be consistent throughout the agency. Each record shall include, but not be limited too, the following:~~
 - ~~a. Identification and sociodemographic information~~
 - ~~b. A data base sufficient to describe the client's background, resources and need for services~~
 - ~~c. An individual service plan, reviewed and updated every three months with documentation of the client's participation in the development of the plan, which shall:~~
 - ~~1. specify the problems to be treated;~~
 - ~~2. specify the goals of treatment;~~
 - ~~3. permit comments concerning the plan by the client or guardian; and~~

- ~~4. be coordinated with other existing resources in the community~~
 - ~~d. Progress notes at appropriate intervals which indicate client changes or progress with respect to treatment goals, and record of services provided in chronological order.~~
 - ~~e. Contacts for all clients shall be recorded at least weekly.~~
- ~~8. All documents and entries in the records shall be dated and attributed to the person making the entry, and shall be written in ink or typed.~~
- ~~9. The agency shall develop and implement a written policy and procedures to assure that client identifiable information is released to persons external to the agency only with the client's prior written informed consent, except as allowed by state law.~~
- ~~10. Release of information forms shall be consistent with the principle of informed consent, and a separate release is required for each recipient of client information. The release shall be specific as to:~~
 - ~~a. The recipient of the information~~
 - ~~b. The purpose for which the information shall be used~~
 - ~~c. The type of information to be released~~
 - ~~d. The time period for which the authorization is applicable, not to exceed one year.~~
 - ~~e. Provision for the revocation of permission~~
- ~~11. The agency shall adopt and implement a written quality assurance plan. This plan shall establish the purposes and function of the agency's quality assurance program.~~
 - ~~a. The quality assurance program shall include but not be limited to the following:~~
 - ~~1. Review of records to determine compliance with these rules and any additional criteria established by the agency to determine whether case records are complete and conform to agency standards.~~

~~2. Quality of case review which includes a determination of whether services provided are adequate, effective and meet established professional standards. Review may be accomplished through review of cases by peers of the responsible case managers or by a supervisor.~~

~~b. The quality assurance program shall be conducted and shall be documented under the direction of the executive director case management or program supervisor at least once every three months.~~

~~6. Professional and Other Qualified Staff~~

~~Case Management services will be provided by any of the following approved staff employed at agencies under contract to and/or designated as Medicaid providers by the Bureau of Social Services. (Maine Medical Assistance Manual, Section 13.06-4)~~

~~1. Social Worker~~

~~A social worker must hold either a Master's degree or Bachelor's degree from a school of social work accredited by the Council on Social Work Education and must be licensed in accordance with 32 M.R.S.A. sub-section 7001.~~

~~2. Registered Nurse~~

~~A registered nurse must have a current and valid license as a registered nurse by the Maine State Board of Nursing and must hold a Bachelor's or Master's degree from an accredited nursing program.~~

~~3 Other Qualified Staff~~

~~Other qualified staff must have a Bachelor's degree or comparable experience at least two years of case work experience, and at least one year of experience of providing services to persons with HIV infection~~

~~7 Supervision~~

~~1. The agency shall develop and maintain clear lines of administrative supervision.~~

- ~~2. The agency shall develop and maintain clear lines of clinical authority within the agency.~~
 - ~~a. Supervision for social workers and other qualified staff shall be provided by an individual with social work licensure at the L.C.S.W. (Licensed Clinical Social Worker) level. Supervisory time shall be no less than 4 hours per month per staff member.~~
 - ~~b. Supervision for nurses who provide case management services shall be provided by a registered nurse with supervisory qualifications. This shall be determined by the case management agency and approved by the Bureau of Child and Family Services. Supervisory time shall be not less than 4 hours per month per staff number.~~
 - ~~c. Supervision shall include but not be limited to the following:~~
 - ~~1. current clinical cases, and case record review~~
 - ~~2. general case management issues~~
 - ~~3. Familiarity with State of Maine AIDS policy issues~~

~~8. Staff Development and Training:~~

- ~~1. The agency shall develop and implement a written policy and procedure for assessing individual staff needs for training in AIDS Case management and AIDS-related issues.~~
- ~~2. Case management staff employed in agencies providing AIDS case management services shall participate in 20 clock hours of AIDS training annually or maintain the number of training hours mandated by professional licensure or registrations whichever is greater.~~

~~9. Volunteers and Students:~~

~~Agencies which engage students/volunteers shall do so in compliance with professional standards and shall:~~

- ~~a. Ensure routine supervision of volunteers and students by a paid staff member.~~

- b. ~~Orient and train volunteers and students in the philosophy of the agency, nature and needs of its clients, and methods of meeting those needs.~~
- c* ~~Train volunteers and students regarding confidentiality statutes.~~
- d. ~~For students, designate a liaison between the agency and the school making placements and clearly indicate to clients that this individual is a student or trainee.~~

~~10. Clients Rights to Case Management Services:~~

~~Case management services shall be provided to persons who test positive for HIV, or who have been diagnosed as having AIDS.~~

~~(M.R.S.A. Section 9, Chapter 501, Section 19205)~~

~~11. Client Grievance Procedure:~~

- 1. ~~The agency shall develop and implement a written policy and procedure which describes a grievance mechanism which allows its clients to grieve the quality, denial or termination of services.~~
- 2. ~~The client shall be informed of his or her right to file a grievance.~~
- 3. ~~All grievance reports shall be submitted to the AIDS Support Services Coordinator at the Bureau of Child and Family Services within 10 working days.~~

~~Statutory Authority: 5 MRSA §19205, 22 MRSA §42~~

~~ADOPTED: February 18, 1990~~